SUPPLEMENT

TO THE

BRITISH MEDICAL JOURNAL.

LONDON: SATURDAY, JANUARY 26TH, 1907.

CONTENTS.

	PAGE
MEETINGS OF BRANCHES AND DIVISIONS:	
Glasgow and West of Scotland Branch: Ayrshire Division ...	33
Birmingham Branch: West Bromwich Division	34
Leinster Branch: Dublin Division	34
TOPOGRAPHICAL REPRESENTATION ON THE COUNCIL:	
J. A. MACDONALD, M.D.	35
ASSOCIATION NOTICES	35
NAVAL AND MILITARY APPOINTMENTS	36
VITAL STATISTICS	36
VACANCIES AND APPOINTMENTS	38
BIRTHS, MARRIAGES, AND DEATHS	39
DIARY FOR THE WEEK...	39
BOOKS, ETC., RECEIVED...	39
CALENDAR	40

Meetings of Branches & Divisions.

[*The proceedings of the Divisions and Branches of the Association relating to Scientific and Clinical Medicine, when reported by the Honorary Secretaries, are published in the body of the* JOURNAL.]

GLASGOW AND WEST OF SCOTLAND BRANCH: AYRSHIRE DIVISION.

THE Executive Committee of the Ayrshire Division has requested the publication of the following memorandum drawn up by that Committee for the consideration of the Division. The scheme propounded may also be of interest to other members of the Association.

SCHEME FOR CONSTITUTION OF COUNCIL OF BRITISH MEDICAL ASSOCIATION.

1. The Council shall consist of thirty members nominated by the Representatives of Divisions.
2. For purposes of nomination, the United Kingdom shall be divided into sections composed of Divisions of Branches which are in geographical relation.
3. The Representatives of Divisions from each section alone shall nominate the Councillor to be returned by that section.
4. The sections shall be as follows:
   (*a*) An Irish section consisting of the Divisions of the Irish Branches.
   (*b*) A Scottish Section, consisting of the Divisions of the Scottish Branches.
   (*c*) A North England Section, consisting of the Divisions of the North of England, North Lancashire and South Westmorland, Yorkshire, East Yorkshire and North Lincolnshire, Midland and Staffordshire Branches—41 Divisions in all.
   (*d*) A West of England Section, consisting of the Divisions of the Lancashire and Cheshire, and North Wales and Shropshire Branches, and the South Wales and Monmouthshire Branch —40 Divisions in all.
   (*e*) A Central England Section, consisting of Divisions of East Anglian, Cambridge and Huntingdon, South Midland, Oxford and Reading, Metropolitan Counties, Birmingham and Worcestershire, and Hereford Branches—41 Divisions in all.
   (*f*) A South of England Section, consisting of Divisions of South-West, West Somerset, Bath and Bristol, Gloucestershire, Dorset and West Hants, Southern, and South-Eastern Branches—41 Divisions in all.
5. The Representatives of—

Irish Section	shall nominate	4	Councillors.
Scotch Section	"	"	4	"
North England Section	"	"	5	"
West England Section	"	"	5	"
Central England Section	"	"	5	"
South England Section	"	"	5	"
		Total	28	

6. The remaining two Councillors shall be nominated by the Representative Meeting as a whole, and they shall be regarded as representing especially the Divisions of Branches outwith the United Kingdom.

Notes.

1. The ideal Council should be elected by the Representatives of Divisions, for thereby the Executive of the Association will be evolved by direct progression from the individual members composing the Association. This will ensure that the Association's policy is in line with the needs and wants of its members.

2. That the Council should be *so* constituted was largely appreciated by the Representatives at the Representative Meeting held in July last, and it was consequently decided that 20 members should be elected by the Branches as at present, but that the other 10 should be elected by the Representatives.

3. It was felt that in the constitution of the Council due regard should be had for "geographical representation." The fear that it would be impossible to obtain this "geographical representation" with a Council wholly elected by the Representatives probably determined the Representatives to the actual decision arrived at.

4. The present scheme has been constructed to ensure that a Council, while wholly elected by the Representatives, must yet be constituted with due regard to "geographical representation."

5. It may be taken for granted that a Council, however constituted, will be anxious to work for the benefit of the whole Association, and not for part at the expense of the rest.

6. It is therefore more to be desired that the Council, as a whole, should be in touch with all the problems and needs presented to the profession all over the country, than that each individual Councillor should represent a numerically-equal constituency.

7. It is size of area rather than number of Associates in an area that determines the variety of conditions and problems presented to the profession in that area. Thus in Lancashire there are more members than in all Ireland, yet the conditions of practice obtaining all over Lancashire will be very similar, whereas the conditions of practice obtaining throughout Ireland will be extremely diverse.

8. In this scheme, therefore, it will be seen that certain

wide districts have more Representatives on the Council than they would be entitled to on a system strictly based on proportionate numbers.

9. The number of Associates are as follows:

In England ...	...	12,034 or 89.96 per cent.
In Scotland ...	...	1,894 or 12.74 ,,
In Ireland ...	...	937 or 6.30 ,,

By a strictly numerical system of Council representation this would entitle—

England to	24.27 Councillors
Scotland to	3.82 ,,
Ireland to	1.90 ,,

10. Bearing in mind the considerations stated previously (Sections 6 and 7) it is proposed to give Ireland four Councillors, Scotland four, and England 20=twenty-eight Councillors.

11. In order to carry out the idea of "geographical representation" in England, it is proposed to divide England into four areas, each composed of an equal number of Divisions; each of these areas to nominate five Councillors. The actual number of Associates in each of these areas is not markedly unequal, being

2,311 in the Northern Section
2 385 in the Western Section
4,445 in the Central Section
2,893 in the Southern Section

12,034

The greater numbers of the Central Section is due to the numerical predominance of London Associates.

12. It is provided by the Scheme that the twenty-eight Councillors representing the United Kingdom shall be nominated by the Representatives of each Section respectively. It does not necessarily follow that the Section will nominate as Councillors only those who are Representatives at the time of election; the actual nominations depend entirely on the choice of the Representatives of each Section.

13. The remaining two Councillors, it is proposed, shall be nominated by the whole Representative Meeting, and they shall be considered as especially representing on the Council all Branches outwith the United Kingdom and to them Colonial Branches could address themselves when they have any matter they wish to bring before the Council or Association. It will probably be convenient that one, if not both, of these Councillors should be resident in London, and this will tend to balance any under-representation existing under the scheme in the Central Section on a consideration of the number in that Section.

14. The division of England into the proposed Sections will probably remain adequate for some considerable time, for, if the Association expands equally in each Section, the proportionate numbers composing each Section will remain similar, seeing that the proportion of Associates to non-Associates in each Section is practically similar, being as 1 to 2.03, 1.89, 2.15 1.93 in the North, West, Central, and South Sections respectively.

15. An objection has been raised that, owing to their mode of election, a Representative does not truly represent the Division that is supposed to elect him It is obvious that, if thought desirable, this anomaly, if it is an anomaly, can be rectified by electing the Representative by ballot paper.

16. Under this proposed scheme the Branch Council would be of value, so that questions affecting the Association generally or a wide district might be discussed by the Representative of Division in that district, and so where necessary all Representatives for that district could act in common. It would probably be wise to ordain that a Representative of a Division at the Representative Meeting should also *ex officio* be a member of the Council of the Branch in which his Division lies.

17. It would probably also be desirable to elect Councillors of the Association Council for more than one year—say three, so many retiring by rotation each year. In this way not more than one or two Councillors would require to be elected by a section at any one time.

N.B.—The numbers on which the scheme is based are taken from the last *Year Book* published by the Association.

[Copy.]

Names of Branches.	No. of Divisions.	No. of Members.	No. of Practitioners in Area.
Northern Section:			
North of England	17	532	1,034
North Lancashire and South Westmorland ...	3	141	208
Yorkshire	10	771	1,773
East Yorkshire and North Lincolnshire ...	2	145	275
Midland	6	515	1,065
Staffordshire	3	207	339
	41	2,311	4,694
Western Section:			
Lancashire and Cheshire	31	1,616	3,613
North Wales and Shropshire	4	322	543
South Wales and Monmouthshire	5	447	825
	40	2,385	4,531
Central Section:			
East Anglian	10	430	1,034
Cambridge and Huntingdon	1	166	303
South Midland	3	244	441
Oxford and Reading	3	268	416
Metropolitan Counties	15	2,736	6,590
Birmingham	7	487	928
Worcestershire and Herefordshire ...	2	114	205
	41	4,445	9,620
Southern Section:			
South-West	6	436	762
West Somerset	1	82	138
Bath and Bristol	3	400	661
Gloucestershire	1	127	204
Dorset and West Hants	2	200	407
Southern	7	401	724
South-Eastern	21	1,247	2,687
	41	2,893	5,583

BIRMINGHAM BRANCH:

WEST BROMWICH DIVISION.

A MEETING of the West Bromwich Division was held in the Board Room of the District Hospital on Wednesday, January 16th, under the chairmanship of Dr. T. SANSOME, J.P.

Apologies for Non-attendance.—Apologies were received from Drs Stephen, H. Manley, Langley Browne, Urquhart, and Darley Weston.

Vote of Sympathy.—A vote of sympathy was passed to Dr. Stephen and Dr. Urquhart.

General Medical Council Election.—A vote of congratulation was passed to Dr. H. Langley Browne on the result of the election to General Medical Council.

Report of Division to Branch.—The HONORARY SECRETARY read the report of the Division to the Branch; this was approved and adopted.

Poor-law Commission.—The questions in the SUPPLEMENT of December 8th, 1906, *re* Royal Commission on the Poor Law were then considered and answers adopted.

LEINSTER BRANCH:

DUBLIN DIVISION.

A QUARTERLY general meeting of the Division was held at the Royal College of Physicians on January 11th, Dr. OULTON in the chair.

Confirmation of Minutes.—The minutes of the last general meeting were read and signed.

Election of Central Council.—The HONORARY SECRETARY reported the action taken by the Committee, the following letter had been sent to every Division in Great Britain:

Dublin, November 14th, 1906.

DEAR SIR,

Many members of the Dublin Division have felt that the proposal, which was carried by the Annual Representative Meeting last July, that the new Charter, which is under consideration, should provide that a substantial portion of the Council should be elected by the General Representative Meeting, would be disastrous to the provincial and more remote portions of the Association, by throwing an undue amount of power into the hands of the London district. That such is no idle fancy has been unmistakably shown by the composition of the Special Finance Committee of Inquiry. No representative of any Irish, Scotch, or Welsh Division was appointed, and out of twenty candidates representing English Divisions three were elected, while out of seven from London four were appointed, the London members alone forming a majority of those elected.

It was attempted to get over the difficulty by saying that geographical representation should be safeguarded, but no method of doing this was put forward.

These matters were discussed at a meeting of the Dublin Division held on October 30th, 1906, and the following resolution passed unanimously:

> That the Dublin Division should resist in every way in their power the proposal that the Council should be elected at the Representative Meeting, as they believe if not safeguarded, amongst those elected the London area will be largely over-represented, and in any case no Representative Meeting would be able to elect a member for an Irish constituency better than those living in Ireland. Furthermore, that the constitution of the Council should be determined by ordinance, and not by by-law.

We should be glad if you would lay this letter before your Division, and let us know, as soon as possible, whether you are in substantial agreement with it.

If so, we are anxious to arrange a common line of action with other Divisions to be taken at the Special Representative Meeting next January.

O'C. J DELAHOYDE, Vice-Chairman.
L. G. GUNN, Honorary Secretary,
43, Fitzwilliam Square,
Dublin.

Replies had been received promising assistance from practically the whole of Ireland and from numerous Divisions in Scotland and England. The general meeting expressed their hearty approval of the means the Committee was using to bring this grievance before the members of the Association.

Irish Poor-law Commission.—Dr. DELAHOYDE proposed, and Dr. MCWALTER seconded:

> That the Dublin Division of the British Medical Association records its general approval of the report of the Viceregal Commission into the Irish Poor Law, but protests against any segregation of the Poor-law Medical Service into any distinct classes, and claims that the conditions of the service shall be equal for all entrants.

Dr. CRAIG proposed, and Sir JOHN MOORE seconded, the following amendment:

> That the Dublin Division of the Leinster Branch of the British Medical Association offers its congratulations to the members of the Viceregal Commission on the Irish Poor-law system on the ability and care displayed in the drafting of this report, the suggestions of which are made in a broad and statesmanlike manner, and that the Dublin Division heartily approves the formation of properly remunerated State Medical Service of the entire Poor-law Medical Service, as it is certain to be a distinct advantage to the treatment of the sick poor in Ireland.

Dr. Craig's amendment was carried, and afterwards passed as a resolution by 19 votes to 2.

Irish Local Government Board and Vaccination Instruction.—Dr. MCWALTER proposed and Dr. STRAHAN seconded:

> That in the opinion of the Dublin Division of the British Medical Association, the new Vaccination Instruction Regulations of the Local Government Board of Ireland are unnecessary, and are an interference with the rights of registered medical practitioners.

Carried by 13 votes to 1.

TOPOGRAPHICAL REPRESENTATION ON THE COUNCIL.

SIR,—The letter from the Dublin Division with regard to topographical representation on the Council, which has been circulated to the Divisions, and is, I understand, about to be published in the BRITISH MEDICAL JOURNAL, contains certain misconceptions which, I believe, are prevalent, and which it may be well that I should correct officially, in order to secure a clear understanding of the important subject involved.

In the first place, it appears to be understood that there will be a Special Representative Meeting in January. No date, however, was fixed for a meeting, and as it is probable that the revised Charter will not be ready for consideration by the Divisions before February or March, such meeting of the Representative Body can scarcely be held till May.

In the second place, as regards the subject of topographical representation, on which stress is laid by the Dublin Division, special instruction was given to the Organization Committee by the Annual Representative Meeting of 1906, to make due provision in the revised Charter to secure this, and the Organization Committee is giving effect to this instruction.

It will be well, therefore, for the Divisions to defer their consideration, or at any rate to defer expressing a definite opinion on this matter till the revised draft of the Charter is in their hands, when there will be ample time for deliberation before coming to a decision.—I am, etc.

Taunton, Jan. 20th. J. A. MACDONALD.
Chairman of Representative Meetings.

Association Notices.

BRANCH AND DIVISION MEETINGS TO BE HELD.

BATH AND BRISTOL BRANCH.—The third ordinary meeting of the session will be held at the Medical Library of University College, Bristol, on Wednesday evening, January 30th, at 8 o'clock, Dr. D. S. Davies, President, in the chair. Clinical meeting:—Dr. P. Watson Williams will demonstrate stereoscopic skiagrams of frontal sinuses and maxillary antra He will also show a case of sphenoidal sinus suppuration. Patients will also be shown by Mr. Hey Groves: Two cases of Volkmann's contracture occurring in haemophilia Dr. J. O. Symes: Two cases of rheumatoid arthritis in children. Dr. Michell Clarke: Cases of (1) tabetic arthropathy of right knee and right foot; (2) adherent pericardium; (3) cyanosis in a youth—a case for diagnosis. Mr. Munro Smith: Laminectomy. Mr. Paul Bush: Case of filariasis. Dr. Walker Hall will demonstrate the living worms in Mr Bush's case by means of the projectoscope, if possible. A Council meeting will be held at 7 55.—NEWMAN NEILD, W. M. BEAUMONT, Honorary Secretaries.

BORDER COUNTIES BRANCH.—A general meeting will be held in Carlisle on February 15th, when the Medical Secretary of the Association will deliver an address on Contract Practice. All medical practitioners are invited to attend.—FRANCIS R. HILL, Secretary, Carlisle.

METROPOLITAN COUNTIES BRANCH: KENSINGTON DIVISION.—A meeting will be held on Friday, February 1st, at 4 45 p.m., at the Marylebone Infirmary, St Charles's Square, Notting Hill, W. Cases will be shown by Mr. J. R. Lunn and others.—CHARLES BUTTAR, Honorary Secretary.

METROPOLITAN COUNTIES BRANCH: LAMBETH DIVISION.—The next meeting of the Lambeth Division will be held at the Lambeth Infirmary, Brook Street, Kennington Road, S.E., on Friday, January 25th, at 4 p.m. A meeting of the committee will be held at 3 30 p.m. sharp, prior to the general meeting. Agenda: (1) Minutes of the last meeting. (2) George J. Jenkins, F.R.C.S. (Surgeon to the German Hospital), will read a paper on abscesses in the peritoneal cavity. (3) Dr. M F Quarry (Medical Superintendent of the Lambeth Infirmary) will show cases of interest in the wards of the Infirmary.—W. ALEXANDER ATKINSON, M.D., Honorary Secretary.

PERTHSHIRE BRANCH.—A meeting will be held in the Royal Infirmary, Perth on Friday, February 1st, at 3 20 p.m. Business: Consideration of Draft Branch Rules.—WILLIAM A. TAYLOR, ALEXANDER TROTTER, Joint Honorary Secretaries.

SOUTH-EASTERN BRANCH: BRIGHTON DIVISION.—There will be a meeting of the Division at the Dispensary, 113, Queen's Road, Brighton, on Wednesday, January 30th, at 4.30 p.m. All members are invited to show cases and specimens at the meeting. Mr. Mayo Robson will give an address on the Surgical Treatment of Gastric and Duodenal Ulcer.—RYDING MARSH, Honorary Secretary.

SOUTH-WESTERN BRANCH.—An intermediate meeting of the Branch will be held at the Athenaeum, Plymouth, on Wednesday, January 30th, at 3 p.m. Luncheon (1s. 6d. per head) will be prepared at Risdon's Restaurant, opposite the Athenaeum, between 1 and 2.30 o'clock. Tea will be provided at the same place after the meeting. Agenda:—(*a*) Read and confirm minutes of annual general meeting and of the adjourned annual general meeting. (*b*) Consider communications (if any). (*c*) Exhibition of clinical cases. Mr. C. Hamilton Whiteford: Two cases illustrating the results of Halsted's breast operation with notes on technique. Mr. Russel Rendle: A case of wired oleoranon; a case of skin transplantation. Mr. Donbavand: A case of oesophagotomy for foreign body, and the specimen removed. Mr. George Jackson: A case of thyro-lingual cyst cured after repeated operations; a case of chronic otitis media with mastoid sclerosis and Stacke's operation on both sides. (*d*) Papers. Mr. Griffith C. Wilkin: Notes on a case—diagnosis? Mr. Gilbert T. Arnold: Notes on infiltration anaesthesia in major and minor surgery. Mr. H. G. Shore: Notes on physical exercise at home with the use of apparatus (*e*) Exhibition of pathological specimens, etc. Dr. H. W. Webber: Specimens from cases of heart disease. Dr. Cheyne Wilson: Radiographs of renal and vesical calculi and other subjects.—RUSSELL COOMBE, Honorary Secretary.

ULSTER BRANCH.—The winter meeting of this Branch will be held in Belfast, on Wednesday, January 30th.—CECIL SHAW, M.D., Honorary Secretary, 18, College Square East, Belfast.

Naval and Military Appointments.

ROYAL NAVY MEDICAL SERVICE.

THE following appointments have been made at the Admiralty: JOSEPH C. WOOD, Staff Surgeon to the *President*, additional, for three months' course at West London Hospital, January 17th; CHARLES STRICKLAND, Fleet Surgeon, to the *Cochrane*, on commissioning, undated; ROBERT HICKSON, Fleet Surgeon, to the *Bulwark*, on recommissioning, February 12th; EDWARD SUTTON, Staff Surgeon, to the *Amphitrite*, on recommissioning, undated; FREDERICK A. CAPPS, Staff Surgeon, to the *President*, additional, for three months' study at West London Hospital, January 30th; ROBERT R. FASSON, M.B., Surgeon, to the *Bedford*, on completing, February 5th; HENRY HUNT, Surgeon, to the *Leander*, February 5th.

ROYAL ARMY MEDICAL CORPS.

LIEUTENANT H. C. SIDGWICK, M.B., is among the sufferers from the disastrous earthquake at Kingston, Jamaica He sustained a compound fracture of the leg, but is reported to be progressing favourably.

Colonel D. BRUCE, C.B., F.R.S., M.B., has been granted an extension of two years in his appointment to the Army Medical Advisory Board as Expert in Tropical Diseases.

Lieutenant-Colonel J. R. YOURDI, M.B., has been appointed Senior Medical Officer, Jersey, vice Lieutenant-Colonel F. B. Maclean, R.A.M.C.

Lieutenants E. J. PORTEOUS, M.B., J. C. L. HINGSTON, and H. JACQUES have resigned their commissions, January 19th. They were appointed on probation, January 30th, 1906

CHANGES OF STATIONS.

THE following changes of stations amongst the officers of the Royal Army Medical Corps have been officially reported to have taken place during December, 1906:

		FROM	TO
Lieut.-Col.	D. O'Sullivan	Nathia Gali	Rawal Pindi.
,,	E. L. Maunsell	—	Bloemfontein.
,,	S. C. R. Robinson	W. Com., India	Ahmednagar.
,,	T. P. Woodhouse	Ambala	Lahore.
,,	R. Porter, M.B.	Bloemfontein	Belfast.
,,	J. R. Vourdi, M.B.	Secunderabad.	Jersey.
,,	F. H. Treherne	Murree	Rawal Pindi.
,,	H. A. Haines, M.D.	Dalhousie	Ambala.
,,	C. J. Macdonald, M.D.	Fermoy	Cork.
,,	R. W. Wright	St. Helena	Woolwich.
,,	D. Hennessy, M.D.	Athlone	W.Com., India.
Major	B. H. Scott	Murree	Rawal Pindi.
,,	C. A. Young	Belfast	Athlone.
,,	J. Girvin	London Dist.	W. Africa.
,,	A. L. Borradaile, M.B.	Bury	Chester.
,,	G. S. McLoughlin, D.S.O., M.B.	Colchester	Woolwich.
,,	H. N. Dunn, M.B.	Woolwich	India.
,,	G. J. Buchanan, M.B.	Bareilly	Glasgow.
,,	J. F. M. Kelly, M.B.	Templemore	Cork.
,,	F. R. Buswell	Belgaum	Ahmednagar.
,,	G. St. C. Thom, M.B.	N. Com., India	Lahore.
,,	S. W. Sweetnam	Colchester	Weedon.
,,	F. Kiddle, M.B.	Ahmednagar	Mount Abu.
,,	S. J. C. P. Perry	—	Brighton.
Captain	L. F. Smith, M.B.	Chatham	Woolwich.
,,	E. W. P. V. Marriott	Pembroke D'k	Gibraltar.
,,	C. H. Hopkins	Poona	Belgaum.
,,	F. S. Penny, M.B.	Multan	London Dist.
,,	S. de C. O'Grady, M.B.	Limerick	Fermoy.
,,	J. W. Leake	Lichfield	Sheffield.
,,	R. H. Lloyd	Edinburgh	Piershill.
,,	H. D. Packer	Tidworth	Portsmouth.
,,	H. K. Palmer	Yarmouth	Colchester.
,,	A. Chopping	Sheffield	India.
,,	J. W. Langstaff	Wrexham	Pembroke Dk.
,,	F. Harvey	Aldershot	West Africa.
,,	J. F. Martin, M.B.	Jullundur	Poona.
,,	B. R. Dennis, M.B.	Gosport	Portsmouth.
,,	R. L. Argles	N. Com., India	Lahore.
,,	D. O. Hyde, M.B.	Karachi	Khandalla.
,,	T. H. Stevenson, M.B.	Fyzabad	East. Comd.
Captain	J. Dorgan, M.B.	Poona	Dublin.
,,	R. T. Brown, M.D.	E. Command	London.
,,	P. H. Henderson, M.B.	Colchester	Weedon.
,,	C. R. L. Ronayne, M.B.	Streusall	Lichfield.
,,	R. F. Elliery	Bulford	Devonport.
,,	J. T. Johnson, M.D.	N. Command	Newcastle-on-Tyne.
,,	W. R. P. Goodwin	Murree	Rawal Pindi.
,,	R. N. Hunt, M.B.	Dublin	Belfast.
,,	W. Riach, M.D.	York	Sheffield.
,,	J. C. Kennedy, M.B.	E. Command	Colchester.
,,	W. M. B. Sparkes	S. Command	Portsmouth.
,,	R. V. Cowey	E. Command	Colchester.
,,	J. H. Barbour, M.B.	Belfast	Londonderry.
,,	F. W. Lambelle, M.B.	Leith Fort	Edinburgh.
,,	M. C. Beatty, M.B.	Mhow	Colaba.
,,	T. J. Potter	Aldershot	Deepcut.
,,	A. J. Williamson, M.B.	Hyderabad	Aden.
,,	A. H. Hayes	Subathu	Ambala.
,,	J. W. S. Seccombe	Bulford	India.
,,	J. E. H. Gatt, M.D.	Middelburg, Transvaal	Pretoria.
,,	C. W. Holden	Devizes	Bulford.
Lieutenant	F. M. M. Ommanney	Shorncliffe	Punjab.
,,	E. M. Glanvill, M.B.	Barberton	Harrismith.
,,	T. J. Wright	Colaba	Belgaum.
,,	J. A. Turnbull	Murree	Rawal Pindi.
,,	E. H. M. Moore	Middelburg, Cape Colony	Wynberg, Cape Colony.
,,	S. C. Bowie	Saugor	Poona.
,,	P. Dwyer, M.B.	Kirkee	Mhow.
,,	R. H. L. Cordner	Murree	Rawal Pindi.
,,	R. J. C. Thompson	London Dist.	South Africa.
,,	C. D. M. Holbrooke	Poona	Belgaum.
,,	H. G. Sherren	W. Com., India	,,
,,	R. P. Lewis	Ft. Tregantle	Devonport.
,,	A. M. Rose, M.B.	Bustard Camp	Portsmouth.
,,	V. H. Symons	Devonport	Fort Tregantle
,,	R. A. Bryden	Tidworth	Bulford.
,,	T. B. Moriarty	Curragh	India.
,,	M. B. H. Ritchie, M.B.	Bulford	,,
,,	P. Farrant	Colchester	Ipswich.
,,	E. T. Potts, M.D.	—	Pretoria.
,,	W. M'Conaghy, M.B.	—	,,
,,	T. S. Blackwell	Maryborough Heath Camp	Queenstown.
,,	A. D. O'Carroll, M.B.	Aldershot	R.A.M. Coll.
,,	H. Stewart, M.B.	Cork	Queenstown.
,,	W. R. Galwey, M.B.	Queenstown	Ballincollig.
,,	F. A. M'Cammon, M.B.	Curragh	Belfast.
,,	C. R. M. Morris, M.B.	Kilworth	Cork
,,	M. G. Dill, M.B.	Ayr	Edinburgh.

Lieutenant-Colonel U. A. JENINGS, M.D., retired pay, has relinquished the medical charge at Cork Detention Barracks, and been succeeded there by Lieutenant-Colonel W. S. DOWMAN, retired pay.

Lieutenant-Colonel J. E. FISHBOURNE, M.D., retired pay, has relinquished the medical charge at Woking Detention Barracks, and been succeeded by Lieutenant-Colonel A. DE C. SHANLAN, retired pay.

Lieutenant-Colonel J. M. NICOLLS, retired pay, has been placed in medical charge of troops at Birr.

Vital Statistics.

ENGLISH URBAN MORTALITY IN THE FOURTH QUARTER OF 1906.

THE vital statistics of the seventy-six large towns dealt with in the Registrar-General's weekly returns are summarized in the accompanying table. During the three months ending December last, 104,689 births were registered in these towns, equal to an annual rate of 26.5 per 1,000 of the population, estimated at 15,818,360 persons in the middle of last year; in the corresponding periods of the three preceding years the rates were 28.6, 28.1, and 26.6 per 1,000 respectively. In London the birth-rate last quarter was 25.5 per 1,000, while it averaged 27.0 per 1,000 in the seventy-five other large towns, among which the rates ranged from 15.7 in Hastings, 16.9 in Bournemouth, 18.0 in Halifax, 18.4 in Hornsey, 18.8 in Bradford, 20.5 in Burton-on-Trent, and 20.6 in Northampton, to 33.1 in Middlesbrough, 33.2 in Bootle, 33.8 in Merthyr Tydfil, 34.1 in St. Helens, 34.6 in Rhondda, and 35.0 in Tynemouth.

During the quarter under notice 63,897 deaths were registered in these towns, equal to an annual rate of 16.2 per 1,000; in the corresponding quarters of the three preceding years the rates were 17.3, 17.5, and 15.8 per 1,000. In London the rate of mortality last quarter was 16.0 per 1,000, while it averaged 16.3 per 1,000 in the seventy-five large provincial towns, and ranged from 7.3 in Hornsey, 8.5 in King's Norton, 10.2 in Northampton, 10.9 in East Ham, 11.0 in Willesden, 11.3 in Handsworth (Staffs), and 11.4 in Leyton, to 20.2 in Wigan, 20.3 in Sunderland, 20.4 in Preston, 20.5 in Burnley, 21.0 in Rochdale, 21.2 in Middlesbrough, 21.8 in South Shields, and 22.1 in Oldham.

The 63,897 deaths from all causes in the seventy-six towns last quarter included 6,788 which were referred to the principal infectious diseases; of these 9 resulted from small-pox, 1,337 from measles, 511 from scarlet fever, 938 from diphtheria, 597 from whooping-cough, 588 from "fever," and 2,808 from diarrhoea. The death-rate from these principal infectious diseases was 1.72 per 1,000 last quarter, having been 1.66, 1.57, and 1.27 per 1,000 in the fourth quarters of the three preceding years. In London the rate was 1.25 per 1,000, while among the seventy-five other towns it averaged 1.92, and ranged from 0.42 in Hastings, 0.51 in Hornsey, 0.52 in Northampton, 0.60 in Bournemouth, 0.61 in Burton-on-Trent, 0.68 in Handsworth (Staffs), and 0.72 in King's Norton, to 3.30 in Hull, 3.31 in Preston, 3.67 in Norwich, 3.88 in Warrington, 3.94 in Bootle, 4.24 in Oldham, 5.38 in Rotherham, and 5.43 in South Shields. The 1,337 deaths from measles were equal to an annual rate of 0.34 per 1,000; in London the death-rate from this disease was 0.18 per 1,000, while it averaged 0.41 in the seventy-five other large towns, and was highest in Norwich, Bootle, Warrington, Rochdale, Oldham, Rotherham, and South Shields. The 511 fatal cases of scarlet fever corresponded to an annual rate of 0.13 per 1,000; in London also the rate of mortality from this disease was 0.13 per 1,000, while in the seventy-five other large provincial towns the disease was proportionally most fatal in Hanley, Wolverhampton, Leicester, Birkenhead, Manchester,

Analysis of the Vital Statistics of Seventy-six of the Largest English Towns during the Fourth Quarter of 1906.

Towns.	Estimated Population middle of 1906.	Births.	Deaths.	Annual Rate per 1,000 Living. Births.	Deaths.	Principal Infectious Diseases.	Deaths from Principal Infectious Diseases.	Small-pox.	Measles.	Scarlet Fever.	Diphtheria.	Whooping-Cough.	Fever.	Diarrhoea.	Deaths of Children under one year of age to 1,000 Births.	Rate per cent. of Uncertified Deaths.
76 Towns	15,818,360	104,689	63,897	26.5	16.2	1.72	6,788	9	1,337	511	933	597	588	2,808	138	1.0
75 Provincial Towns	11,097,143	74,700	45,061	27.0	16.3	1.92	5,329	9	1,124	359	725	417	479	2,216	143	1.3
London	4,721,217	29,589	18,836	25.5	16.0	1.23	1,459	—	213	152	213	180	109	592	125	0.2
Croydon	151,011	883	482	23.5	12.8	1.18	44	—	—	1	14	7	1	21	108	—
Willesden	143,622	940	393	26.3	11.0	0.88	31	—	2	1	2	11	3	12	116	1.0
Hornsey	86,935	398	159	18.4	7.3	0.51	11	—	1	—	2	—	3	5	70	—
Tottenham	119,503	806	391	27.1	13.1	1.35	40	—	—	1	6	8	4	21	117	—
West Ham	301,617	2,229	1,188	29.8	15.8	2.17	164	—	43	15	21	7	13	65	142	—
East Ham	129,886	854	353	26.4	10.9	1.81	59	—	14	4	5	13	4	19	114	—
Leyton	118,287	804	337	27.3	11.4	1.35	40	—	2	3	18	5	1	11	103	—
Walthamstow	121,334	833	410	27.5	13.6	1.91	58	—	3	7	20	8	4	16	132	—
Hastings	67,144	263	195	15.7	11.6	0.42	7	—	1	2	1	—	1	2	87	—
Brighton	128,095	666	457	20.9	14.3	0.84	30	—	10	—	4	4	2	10	93	—
Portsmouth	205,118	1,438	784	28.1	15.3	1.25	64	—	1	1	26	13	3	20	138	1.0
Bournemouth	67,702	285	230	16.9	13.6	0.60	10	—	5	—	—	—	1	4	91	—
Southampton	117,312	659	351	22.5	12.0	0.82	24	—	—	—	14	3	—	7	86	—
Reading	78,987	486	231	24.7	11.7	1.73	34	—	—	—	20	1	2	11	66	2.2
Northampton	93,749	482	238	20.6	10.2	0.52	12	—	—	—	2	1	2	7	89	1.7
Ipswich	71,809	417	255	23.0	14.2	1.18	21	—	—	—	6	—	1	14	123	1.6
Great Yarmouth	52,613	409	240	31.2	18.3	1.38	18	—	—	2	3	1	1	11	115	—
Norwich	117,958	713	572	24.2	19.4	3.67	108	—	57	6	15	12	5	13	153	0.5
Plymouth	118,014	683	487	23.2	16.6	1.80	53	—	37	1	4	1	1	9	135	—
Devonport	78,405	522	258	26.7	13.2	1.64	32	1	16	—	4	1	1	9	105	—
Bristol	363,223	2,210	1,331	24.4	14.7	1.02	92	—	2	6	23	6	9	46	110	0.4
Hanley	66,370	521	330	31.5	19.9	2.89	48	—	—	6	9	5	3	25	161	0.6
Burton-on-Trent	52,922	271	163	20.5	12.4	0.61	8	—	—	—	—	—	1	7	118	1.2
Wolverhampton	100,729	664	359	26.4	14.3	2.00	50	—	—	6	11	3	3	27	126	0.6
Walsall	94,577	635	335	26.9	14.2	1.52	36	—	—	—	10	5	7	14	118	0.6
Handsworth	63,819	358	180	22.5	11.3	0.68	11	—	1	3	1	—	1	5	92	0.6
West Bromwich	68,469	544	243	31.9	14.2	1.25	21	—	3	1	1	—	5	11	118	0.8
Birmingham	548,022	3,676	2,152	26.9	15.8	1.57	215	—	59	14	25	13	20	84	146	3.5
King's Norton	72,608	416	153	23.0	8.5	0.72	13	—	—	3	—	4	—	6	79	3.9
Smethwick	64,531	493	220	30.6	13.7	1.68	27	—	15	3	5	—	1	3	110	1.4
Aston Manor	82,288	509	275	24.8	13.4	1.52	31	—	12	1	5	—	1	12	136	1.1
Coventry	76,374	585	294	30.7	15.4	1.43	27	—	—	2	3	3	2	17	118	3.1
Leicester	232,111	1,393	782	24.1	13.5	2.12	122	—	56	16	9	1	7	33	128	0.9
Grimsby	69,359	491	249	28.4	14.4	1.50	26	—	3	—	7	—	2	14	165	2.4
Nottingham	254,563	1,573	980	24.8	15.4	1.26	79	—	1	8	12	3	17	38	156	0.8
Derby	123,981	759	496	24.6	16.0	1.32	41	—	1	—	19	4	5	12	124	—
Stockport	99,646	632	480	25.4	19.3	2.86	71	—	33	1	1	5	7	24	166	0.4
Birkenhead	117,292	854	497	29.2	17.0	2.08	61	—	8	7	10	7	10	19	144	0.4
Wallasey	64,578	376	243	23.4	15.1	2.11	34	—	3	2	3	1	1	24	149	0.4
Liverpool	739,180	5,749	3,625	31.2	19.7	2.59	477	—	93	32	47	31	48	226	161	3.0
Bootle	65,989	546	318	33.2	19.3	3.94	65	—	36	1	6	2	3	17	139	3.8
St. Helen's	91,153	774	369	34.1	16.2	1.80	41	—	8	1	6	2	10	14	154	4.9
Wigan	87,588	688	441	31.5	20.2	3.25	71	—	28	3	1	2	12	25	145	0.2
Warrington	69,280	490	322	28.4	18.6	3.88	67	—	29	2	3	1	4	28	157	3.7
Bolton	180,502	1,087	716	24.2	15.9	1.83	82	—	—	7	7	2	21	45	153	0.4
Bury	58,744	317	248	21.6	16.9	1.51	19	—	1	—	1	2	2	13	170	1.6
Manchester	637,126	4,545	3,112	28.6	19.6	1.99	316	—	32	47	50	17	35	135	158	0.8
Salford	234,077	1,705	1,098	29.2	18.8	2.77	162	—	42	8	28	9	17	58	164	0.1
Oldham	140,969	954	778	27.1	22.1	4.24	149	—	86	7	4	8	2	42	166	0.5
Rochdale	87,189	485	487	22.3	21.0	2.71	59	—	44	—	5	1	—	9	157	2.6
Burnley	102,808	650	526	25.4	20.5	3.01	77	—	10	5	2	1	3	16	226	1.0
Blackburn	134,015	821	544	24.6	16.3	2.43	81	—	1	4	7	5	8	56	163	2.2
Preston	116,379	756	591	26.1	20.4	3.31	96	—	12	4	5	8	4	63	237	2.9
Barrow-in-Furness	60,967	436	214	28.7	14.1	1.06	16	—	—	1	3	1	—	11	131	5.1
Huddersfield	94,851	554	418	23.4	17.7	1.78	42	—	10	3	3	6	3	17	125	1.7
Halifax	109,272	491	423	18.0	15.5	1.02	28	—	2	—	12	—	3	11	132	1.2
Bradford	288,544	1,356	1,085	18.8	15.1	1.25	90	—	4	3	15	14	22	32	131	0.8
Leeds	463,495	2,883	1,677	24.9	14.5	1.01	118	—	2	10	26	20	19	41	129	—
Sheffield	447,951	3,314	1,887	29.7	16.9	2.32	258	—	45	52	21	14	22	104	159	1.9
Rotherham	61,098	458	298	30.1	19.6	5.38	82	—	43	5	2	9	2	21	162	4.4
York	83,467	507	285	24.4	13.7	1.01	21	—	—	—	1	4	7	9	87	—
Hull	262,426	1,854	1,126	28.3	17.2	3.30	216	8	61	6	35	15	25	66	127	0.4
Middlesbrough	100,069	825	530	33.1	21.2	3.04	76	—	1	2	8	13	8	44	178	1.3
Stockton-on-Tees	52,664	421	224	32.1	17.1	1.36	18	—	—	—	2	2	2	12	157	1.3
West Hartlepool	73,387	508	259	27.8	14.7	2.06	38	—	1	1	9	3	1	23	161	0.4
Sunderland	154,385	1,252	782	32.8	20.3	1.74	67	—	2	2	12	6	10	35	159	4.1
South Shields	111,402	872	606	31.4	21.8	5.43	151	—	87	3	8	15	4	34	177	3.0
Gateshead	123,191	950	544	30.9	17.7	2.68	82	—	14	3	15	2	4	44	181	5.5
Newcastle-on-Tyne	268,721	1,978	1,155	29.5	17.2	2.02	136	—	21	9	24	11	5	66	147	0.1
Tynemouth	54,138	473	255	35.0	18.9	1.33	18	—	1	2	2	1	3	9	161	1.6
Newport (Mon.)	74,227	555	359	30.0	19.4	2.15	40	—	13	1	1	3	2	20	184	0.8
Cardiff	183,823	1,184	683	25.8	14.9	0.94	43	—	1	2	3	9	2	26	159	0.1
Rhondda	127,684	1,101	478	34.6	15.0	1.73	55	—	5	1	4	3	7	35	139	0.6
Merthyr Tydfil	74,961	632	364	33.8	19.5	2.46	46	—	—	6	3	2	3	32	177	0.5
Swansea	96,848	749	481	31.0	19.9	2.18	53	—	—	3	3	17	1	29	162	0.2

Sheffield, Rotherham, and Merthyr Tydfil. The 938 deaths from diphtheria were equal to an annual rate of 0.24 per 1,000; in London the diphtheria death-rate was 0.18 per 1,000; it averaged 0.26 per 1,000 in the seventy-five other large towns, and was highest in Leyton, Walthamstow, Portsmouth, Reading, Norwich, Hanley, Derby, and Hull. The 597 fatal cases of whooping-cough were equal to a rate of 0.15 per 1,000; in London the mortality from this disease was 0.15 per 1,000 also; among the seventy-five other large towns the rates were highest in Willesden, East Ham, Norwich, Rotherham, Middlesbrough, South Shields, and Swansea. The 588 deaths referred to different forms of "fever" corresponded to an annual rate of 0.15 per 1,000; in London the "fever" death-rate was only 0.09 per 1,000, or about one-half the average rate in the seventy-five other large towns; the greatest proportional mortality from "fever" in these towns occurred in Birkenhead, Wigan, St. Helens, Bolton, Bradford, York, Hull, and Middlesbrough. The 2,808 fatal cases of diarrhœa corresponded to an annual rate of 0.71 per 1,000; in London the death-rate from this disease was 0.50 per 1,000; while among the seventy-five other large towns the rate averaged 0.80 per 1,000, and was highest in Warrington, Burnley, Blackburn, Preston, Middlesbrough, and Merthyr Tydfil. Of the 9 fatal cases of small-pox, 8 belonged to Hull and 1 to Devonport.

Infant mortality, measured by the proportion of deaths among children under one year of age to registered births, was equal to 138 per 1,000 last quarter, against 167, 147, and 134 in the corresponding periods of the three preceding years; in London the rate last quarter was 125 per 1,000, while it averaged 138 in the seventy-five other large towns, and ranged from 66 in Reading, 70 in Hornsey, 79 in King's Norton, 83 in Southampton, 89 in Northampton, 87 in Hastings, and 91 in Bournemouth, to 177 in South Shields and in Merthyr Tydfil, 178 in Middlesbrough, 181 in Gateshead, 184 in Newport (Mon.), 226 in Burnley and 237 in Preston.

The causes of 625, or 1.0 per cent., of the deaths registered in the seventy-six towns last quarter were not certified, either by a registered medical practitioner or by a coroner. All the causes of death were duly certified in Croydon, Hornsey, Tottenham, West Ham, East Ham, Leyton, Walthamstow, Hastings, Brighton, Bournemouth, Southampton, Great Yarmouth, Plymouth, Devonport, Derby, Leeds, and York; the highest proportions of uncertified deaths were 3.8 in Bootle, 3.9 in King's Norton, 4.1 in Sunderland, 4.4 in Rotherham, 4.9 in St. Helens, 5.1 in Barrow-in-Furness, and 5.5 in Gateshead.

HEALTH OF ENGLISH TOWNS.

IN seventy-six of the largest English towns, including London, 8,747 births and 5,549 deaths were registered during the week ending Saturday last, January 19th. The annual rate of mortality in these towns, which had been 22.4 and 20.7 per 1,000 in the two preceding weeks, further declined last week to 18.1 per 1,000. The rates in the several towns ranged from 8.7 in Handsworth (Staffs.), 9.0 in King's Norton, 9.1 in Reading and in West Bromwich, 9.3 in Hornsey, 10.2 in Wallasey, 10.5 in Bournemouth, and 11.5 in East Ham, to 22.5 in Huddersfield, 23.5 in Oldham, 24.8 in South Shields, 25.2 in Warrington, 25.8 in York, 26.0 in Hull, 27.6 in Rotherham, and 35.3 in Middlesbrough. In London the rate of mortality was 18.4 per 1,000, while it averaged 17.9 in the seventy-five other large towns. The death-rate from the principal infectious diseases averaged 1.2 per 1,000 in these towns; in London this death-rate was equal to 1.1 per 1,000, while it ranged upwards in the other large towns to 3.1 in Birkenhead, 3.6 in Middlesbrough, 3.7 in Grimsby, 4.3 in Hull, 5.1 in St. Helens, 5.9 in Warrington, and 7.5 in Rotherham. Measles caused a death-rate of 1.3 in Birkenhead, 1.5 in West Ham and in Stockport, 1.6 in Smethwick, 2.2 in Grimsby, 2.3 in West Bromwich, 3.1 in Hull, 4.5 in St. Helens, 5.2 in Warrington, and 6.7 in Rotherham; scarlet fever of 1.4 in South Shields; diphtheria of 1.3 in Aston Manor; whooping-cough of 1.1 in Walsall, 1.2 in York, 1.3 in Leyton, 1.5 in Hastings, and 1.7 in Willesden; and "fever" of 1.1 in Huddersfield. The mortality from diarrhœa showed no marked excess in any of the large towns. No fatal case of small-pox was registered last week either in London or in any of the large provincial towns, and no small-pox patients were under treatment during the week in any of the Metropolitan Asylums Hospitals. The number of scarlet fever patients in these hospitals and in the London Fever Hospital, which had been 3,846, 3,707, and 3,521 at the end of the three preceding weeks, had further fallen to 3,405 at the end of last week; 325 new cases were admitted during the week, against 237, 309, and 285 in the three preceding weeks.

HEALTH OF SCOTTISH TOWNS.

DURING the week ending Saturday last, January 19th, 931 births and 713 deaths were registered in eight of the principal Scottish towns. The annual rate of mortality in these towns, which had been 19.0, 22.9, and 20.8 per 1,000 in the three preceding weeks, further declined last week to 20.5 per 1,000, but was 2.4 per 1,000 above the mean rate last week in the seventy-six large English towns. Among these Scottish towns the death rates ranged from 15.0 in Perth and 17.1 in Paisley to 22.7 in Dundee and 23.9 in Aberdeen. The death-rate from the principal infectious diseases averaged 2.3 per 1,000 in these towns, the highest rates being recorded in Glasgow, Aberdeen, and Greenock. The 322 deaths registered in Glasgow included 2 which were referred to measles, 5 to diphtheria, 12 to whooping-cough, 2 to "fever," 5 to diarrhœa, and 14 to cerebro-spinal meningitis. Three fatal cases of measles, 6 of diarrhœa, and 1 of cerebro-spinal meningitis were recorded in Edinburgh; 4 of measles, 2 of diphtheria, 5 of whooping-cough, and 4 of diarrhœa in Aberdeen; 3 of whooping-cough in Greenock; and 1 of cerebro-spinal meningitis in Leith.

HEALTH OF IRISH TOWNS.

DURING the week ending Saturday, January 12th, 547 births and 471 deaths were registered in six of the principal Irish towns, against 581 births and 490 deaths in the preceding period. The annual death-rate in these towns, which had been 21.5, 17.6, and 24.0 per 1,000 in the three preceding weeks, rose to 24.6 per 1,000 in the week under notice, this figure being 3.9 per 1,000 higher than the mean annual rate for the seventy-six English towns for the corresponding period. The figures ranged from 11.0 in Londonderry and 23.4 in Belfast to 29.0 in Dublin and 31.5 in Cork. The zymotic death-rate in the same six Irish towns averaged 1.4 per 1,000, or 0.1 per 1,000 higher than during the preceding period, the highest figure—3.4—being recorded in Cork, while Londonderry and Waterford registered no deaths under this heading at all. The deaths from whooping-cough in the twenty-one urban districts numbered 11.

Vacancies and Appointments.

This list of vacancies is compiled from our advertisement columns, where full particulars will be found. To ensure notice in this column, advertisements must be received not later than the first post on Wednesday morning.

VACANCIES.

ALNWICK INFIRMARY.—House-Surgeon. Salary, £120 per annum.

BARROW-IN-FURNESS: LONSDALE HOSPITAL.—House-Surgeon. Salary, £100 per annum.

BRADFORD POOR-LAW UNION.—Resident Medical Officer for Hospital and Workhouse. Salary, £100 per annum.

BRISTOL DISPENSARY.—Medical Officer.

BRISTOL ROYAL INFIRMARY.—(1) Resident Obstetric Officer. (2) Resident Junior House-Surgeon. (3) Resident Casualty Officer. Salaries for (1) £75 per annum; and for (2) and (3) at the rate of £50 per annum.

CARDIFF INFIRMARY.—House-Surgeon. Salary at the rate of £60 per annum.

CHELSEA HOSPITAL FOR WOMEN, Fulham Road, S.W.—Registrar. Honorarium, £40 per annum.

CITY OF LONDON LYING-IN HOSPITAL, City Road, E.C.—District Surgeon.

EAST LONDON HOSPITAL FOR CHILDREN, Shadwell, E.—Resident Medical Officer. Salary, £100 per annum.

HAMPSTEAD GENERAL HOSPITAL.—Resident Medical Officer. Salary at the rate of £80 per annum.

HASTINGS, ST. LEONARDS, AND EAST SUSSEX HOSPITAL.—Assistant House-Surgeon. Honorarium, £20 for six months.

HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST, Brompton.—Resident House-Physicians. Honorarium, £25 for six months.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—(1) House-Physician. (2) Assistant Casualty Medical Officer. Salaries, 25 guineas for eight months, and £3 10s. washing allowance.

KIDDERMINSTER INFIRMARY AND CHILDREN'S HOSPITAL.—House-Surgeon. Salary, £100 per annum, increasing £10 if reappointed.

LIVERPOOL: STANLEY HOSPITAL.—(1) Honorary Physician. (2) House-Surgeon. Salary, £60 per annum.

MANCHESTER: ANCOATS HOSPITAL.—Resident House-Physician. Salary, £80 per annum.

MENSTON: WEST RIDING ASYLUM.—(1) Second Assistant Medical Officer. (2) Fourth Assistant Medical Officer. Salary to commence at £200 and £150 per annum respectively.

MIDHURST: KING EDWARD VII SANATORIUM.—Junior Assistant Medical Officer. Salary, £100 per annum.

NEWCASTLE-UPON-TYNE AND NORTHUMBERLAND SANATORIUM FOR CONSUMPTION, Barrasford-on-Tyne.—Resident Medical Officer, male. Salary £180, rising to £200 per annum.

PADDINGTON INFIRMARY.—Second Assistant to the Medical Superintendent. Salary at the rate of £72 per annum.

PLYMOUTH: SOUTH DEVON AND EAST CORNWALL HOSPITAL.—Assistant House-Surgeon. Salary at the rate of £50 per annum.

ROYAL HOSPITAL FOR DISEASES OF THE CHEST, City Road, E.C.—Resident Medical Officer. Salary at the rate of £120 per annum.

ROYAL NATIONAL ORTHOPAEDIC HOSPITAL, Great Portland Street, W.—Honorary Assistant Anaesthetist.

ROYAL PIMLICO DISPENSARY, 104, Buckingham Palace Road, S.W.—Visiting Medical Officer.

SHEFFIELD: JESSOP HOSPITAL FOR WOMEN.—House-Surgeon. Salary, £60 per annum.

SHEFFIELD UNIVERSITY.—Chair of Pathology.

VENTNOR: ROYAL NATIONAL HOSPITAL FOR CONSUMPTION AND DISEASES OF THE CHEST.—Two Assistant Resident Medical Officers. Salary, £80 per annum each.

WEST HAM UNION.—Two District Medical Officers. Salary, £130, rising to £180 per annum each.

APPOINTMENTS.

BLUCKE, H. F. S., M.R.C.S., L.R.C.P.Lond., Medical Officer of Health for the Borough of Shaftesbury.

CLAPHAM, S. C., M.B., B.S.Durh., District Medical Officer of the Blandford Union.

COLEMAN, J. G. B., M.R.C.S., L.R.C.P.Lond., District Medical Officer of the Headington Union.

CROSS, E. W., M.R.C.S., L.R.C.P.Lond., Medical Officer of the Leytonstone Schools of the Parish of Bethnal Green.

DODGSON, Henry, M.B., Ch.B., Public Vaccinator and Poor-law Medical Officer for the No. 2 Kirkoswald Division of the Penrith Union.

DOUTY, Edward H., M.A., M.D., M.C.Camb., F.R.C.S., M.R.C.P., M.D.Paris, M.D.Lausanne, Surgeon to the Queen Victoria Memorial Hospital, Nice.

HARRIS-JONES, P. J., M.B., Ch.B.Vict., Resident Medical Officer to the Bournemouth Royal National Sanatorium.

HAY, John, M.D., M.R.C.P., Assistant Physician to the Royal Infirmary, Liverpool.

LAVAL, E., M.B., M.S.Edin., Resident Medical Officer at the Epileptic Colony, Langho, of the Chorlton and Manchester Joint Asylum Committee.

MCNAUGHTON, J. G., M.D., M.R.C.P.Edin., Honorary Physician, Ancoats Hospital, Manchester.

MOSSOP, C. H., M.R.C.S., L.R.C.P.Lond., District and Workhouse Medical Officer of the Romney Marsh Union.

O'DONOVAN, T. J., L.R.C.P. and S.Edin., Medical Officer of the Coolmountain Dispensary District of the Dunmanway Union.

ROE, E. E. W., M.R.C.S., L.R.C.P.Lond., District Medical Officer of the Droxford Union.

SHAW, W. F., M.D., reappointed Resident Surgical Officer to the St. Mary's Hospitals, Manchester.

STEVENS, W. Mitchell, M.D.Lond., M.R.C.P., Honorary Consulting Physician to the Royal Hamadryad Seamen's Hospital, Cardiff.

THOMAS, E., L.R.C.P.Edin., L.F.P.S.Glasg., District Medical Officer of the Pwllheli Union.

WEBSTER, H. G., M.R.C.S., L.R.C.P.Lond., District Medical Officer of the Foleshill Union.

YOUNG, J. Stirling, M.B., Ch.B., Fourth House-Surgeon to the St. Mary's Hospitals, Manchester.

BIRTHS, MARRIAGES, AND DEATHS.

The charge for inserting advertisements of Births, Marriages, and Deaths is 3s. 6d., which sum should be forwarded in post-office orders or stamps with the notice not later than Wednesday morning, in order to ensure insertion in the current issue.

BIRTH.

HODGSON.—On January 18th, at Leyburn, 6, Mitcham Lane, Streatham, S.W., the wife of Charles Hodgson, L.R.C.P., M.R.C.S.Eng., of a son.

RYALL.—On January 19th, at 77, Harley Street, W., to Mr. and Mrs. Canny Ryall, a son.

MARRIAGES.

HAMILTON—HALSEY.—On January 17th, at Streatham Congregational Church, by the father of the bride, Richard Hamilton, M.D., of Saltley, Birmingham, son of the late Andrew Hamilton, Manchester, to Evangeline, eldest daughter of the Rev. Joseph Halsey, late of Anerley.

SIMSON—CLARKE.—On January 17th, at St. George's, Hanover Square, by the Rev. Canon Bristow, M.A., of Southwark Cathedral, assisted by the Rev. Daven Jones, B.A., Vicar of Kidwelly, and the Rev. David Anderson, M.A., Rector, Captain Harold Simson, R.A.M.C., third son of Thomas Simson, of Blackheath, to Kate Litton, eldest daughter of Ernest Clarke, M.D., F.R.C.S., of Chandos Street, Cavendish Square.

THOMPSON—CLARKE.—January 15th, at St. Peter's Church, Morley, by the Rev. H. T. Robinson, B.A., assisted by the Rev. F. Sykes, M.A., John Andrew Douglas, M.B., Ch.B.Edin., fourth son of Alexander Thompson, Esq., Barmeal, Wigtownshire, N.B., to Amy Winifred, second daughter of J. C. Clarke, M.R.C.S. and L.S.A., of Bank House, Morley, Yorks.—At home, Comberton House, Halesowen, February 17th and 18th.

DEATH.

PEDDIE.—At 15, Rutland Street, Edinburgh, on January 19th, of pneumonia, Alexander Peddie, M.D., F.R.C.P.Edin., etc., in his 97th year.

DIARY FOR THE WEEK.

MONDAY.

MEDICAL SOCIETY OF LONDON, 11, Chandos Street, Cavendish Square, W., 8.30 p.m.—Discussion: Some Points in the Diagnosis and Treatment of Laryngeal Cancer; to be introduced by Sir Felix Semon, C.V.O., M.D.

WEDNESDAY.

BRITISH BALNEOLOGICAL AND CLIMATOLOGICAL SOCIETY, 20, Hanover Square, W., Ordinary Meeting. 5.30 p.m. Discussion: The Influence of Climate upon Gout, Rheumatism, and Rheumatoid Arthritis; to be introduced by Dr. Charles W. Buckley (Buxton). Dr. Joseph Groves (Isle of Wight), Dr. Hamilton Cumming (Torquay), and Dr. Percy Lewis (Folkestone) will take part in the discussion.

THURSDAY.

OPHTHALMOLOGICAL SOCIETY OF THE UNITED KINGDOM, 11, Chandos Street, Cavendish Square, W.—Ordinary Meeting. Card Specimens, 8 p.m.; Papers at 8.30. Mr Simeon Snell: (1) A Case of Tubercle of the Eyeball in which the Opsonic Index was regularly taken; (2) a Family Tree of Nyctalopia. Mr. Arnold Lawson: Two Cases of Streptococcic Infection of the Conjunctiva. Mr. G. Brooksbank James: Some Notes on Stereoscopic Vision.

FRIDAY.

SOCIETY OF ANAESTHETISTS, 20, Hanover Square, W., 8.30 p.m.—Paper by Dr. L. Guthrie: Poisonous After-effects of Chloroform and of Ether.

WEST LONDON MEDICO-CHIRURGICAL SOCIETY, West London Hospital, 8 p.m.—Pathological Meeting.

POST-GRADUATE COURSES AND LECTURES.

CENTRAL LONDON THROAT AND EAR HOSPITAL, Gray's Inn Road, W.C.—Wednesday, 5 p.m.: Middle Ear and Labyrinth.

CHARING CROSS HOSPITAL, W.C.—Tuesday, 4 p.m.: Medical. Thursday, 4 p.m.: Surgical.

HOSPITAL FOR SICK CHILDREN, Great Ormond Street, W.C.—Thursday, 4 p.m.: Hip Disease.

LONDON SCHOOL OF CLINICAL MEDICINE, Dreadnought Hospital, Greenwich. Clinics: Monday, Medicine, 2.30 p.m.; Surgery, 3.15 p.m.; Diseases of the Throat, Nose, and Ear, 4 p.m. Tuesday, Medicine, 2.30 p.m.; Surgery, 3.15 p.m.; Diseases of the Skin, 4 p.m. Wednesday, Medicine, 2.30 p.m.; Ophthalmology, 3.30 p.m. Thursday, Medicine, 2.30 p.m.; Surgery, 3.15 p.m.; Radiography, 4 p.m. Friday, Medicine, 2.30 p.m.; Surgery, 3.15 p.m. Operations each day at 2.30. Out-patient Demonstrations: Medical and Surgical, 10 a.m. daily; Ears and Throats, noon, Monday and Thursday; Eyes, 11 a.m., Wednesday and Saturday; Skin, noon, Tuesday and Friday. Special Lectures: Monday, Nasal Suppuration; Wednesday, Iritis; Thursday, Angina Pectoris.

MEDICAL GRADUATES' COLLEGE AND POLYCLINIC, 22, Chenies Street, W.C.—The following clinical demonstrations have been arranged for next week at 4 p.m. each day: Monday, Skin; Tuesday, Medical; Wednesday, Surgical; Thursday, Surgical; Friday, Eye. Lectures at 5.15 p.m. each day will be given as follows: Monday, Traumatic Neurosis. Tuesday, The Surgical Anatomy of the Temporal Bone: its Bearings on Suppuration (with Lantern Slides). Wednesday, Cervical Ribs, and Muscular Atrophy of the Hands (with Lantern Slides). Thursday, Rectal Haemorrhage; its Causation and Treatment.

NATIONAL HOSPITAL FOR THE PARALYSED AND EPILEPTIC, Queen Square, W.C.—Tuesday, 3.30 p.m.: Cerebral Palsies of Infancy. Friday, 3.30 p.m.: Cases from the Wards.

NORTH-EAST LONDON POST-GRADUATE COLLEGE, Tottenham Hospital, N.—The following are the arrangements for next week: Monday, 9.30 a.m.: Surgical Out-patient Clinic. 2.30 p.m.: Medical Out-patient, Throat, Nose, and Ear Clinics; x-ray Demonstration. Tuesday, 10.30 a.m.: Medical Out-patient Clinic. 2.30 p.m.: Surgical Operations; Surgical and Gynaecological Out-patient Clinics. 4.30 p.m.: Lecture Demonstration on Electro-Diagnosis. Wednesday, 2.30 p.m.: Dermatological, Ophthalmological, and Medical Out-patient Clinics. Thursday, 2.30 p.m.: Gynaecological Operations; Medical and Surgical Out-patient Clinics. 3 p.m.: Medical In-patient Clinic. 4.30 p.m.: Lecture on the Pathology of the Pneumonias. Friday, 9.30 a.m.: Surgical Out-patient Clinic. 2.30 p.m.: Medical Out-patient Clinic; Surgical Operations; Ophthalmological Clinic. 3 p.m.: Medical In-patient Clinic.

POST-GRADUATE COLLEGE, WEST LONDON HOSPITAL, Hammersmith Road, W.—The following are the arrangements for next week: Daily: 2 p.m., Medical and Surgical Clinics; 2.30 p.m., *X* Rays; Operations. Monday and Thursday, 2.30 p.m.: Eye Diseases. Tuesday and Friday, 10 a.m.: Gynaecological Operations. 2.30 p.m.: Diseases of the Skin. Tuesday and Friday, 2 p.m., and Wednesday and Saturday, 10 a.m.: Diseases of Throat, Nose, and Ear. Wednesday, 10 a.m.: Diseases of Children. Wednesday and Saturday, 2.30 p.m.: Diseases of Women. Lectures—Monday, 12 noon: Pathological Demonstration. Monday, 5 p.m.: Clinical Lecture. Tuesday: Ankylostomiasis. Wednesday: The Treatment of Stricture of the Urethra. Thursday: Practical Surgery. Friday: *X* Rays: Diagnosis and Treatment.

BOOKS, ETC., RECEIVED.

Lehmann's Medizinische Atlanten. IV Band. München: J. F. Lehmann. 1907:

Grundriss der deskriptiven Anatomie des Menschen. Von Dr. med. J. Sobotta. III Abteilung. Die Gefässlehre, die Nervenlehre, und die Lehre von den Sinnesorganen des Menschen. M.6.

Atlas der deskriptiven Anatomie des Menschen. Von Dr. J. Sobotta. III Abteilung. 2 Lieferung: Die Sinnesorgane des Menschen nebst einem Anhang: Das Lymphgefässsystem des Menschen. M.6.

International Clinics. A Quarterly. Edited by A. O. J. Kelly, A.M., M.D. Vols. ii and iii. Sixteenth series. 1906. Philadelphia and London: J. B. Lippincott Co.

Our Heritage in the Land. By H. E. Moore, F.S.I., F.S.S. Second edition. London: P. S. King and Son. 1906. 1s.

London: A. and C. Black. 1907:

The Englishwoman's Year Book and Directory. 1907-8. Edited by E. Janes. Twenty-seventh year. 2s. 6d.

The Writers' and Artists' Year Book. 1907. 1s.

A Practical Treatise on Materia Medica and Therapeutics, with especial reference to the Clinical Application of Drugs. By J. V. Shoemaker, M.D., LL.D. Sixth edition. Philadelphia: F. A. Davis Co. 1906. $5.00.

Paris: Vigot Frères:

Manuel Pratique de Massage et de Gymnastique Médicale Suédoise. Par J. E. Marfort. Troisième edition. 1907. Fr.5.

Notions élémentaires de Prophylaxie des Maladies Tropicales. Par R. Wurtz. 1906. Fr.1.

La Sterilité chez la Femme. Par le Dr. E. Hugon. 1907. Fr.2.

Traité des Urines. Par le Dr. E. Gérard. Deuxième edition. 1907. Fr.8.

Manuel de Gynécologie Pratique. Par J. Barozzi. 1907. Fr.10.

Poisons: their Effects and Detection. By A. W. Blyth, M.R.C.S., F.I.C., F.C.S., etc., and M. W. Blyth, B.A., B.Sc., F.I.C., F.C.S., etc. Fourth edition. London: C. Griffin and Co. Ltd. 1906. 21s.

Climatotherapy and Balneotherapy: Health Resorts of Europe and North Africa. Third edition of the Mineral Waters and Health Resorts of Europe. By Sir H. Weber, M.D., F.R.C.P., and F. P. Weber, M.D., F.R.C.P. Edited by F. P. Weber. London: Smith, Elder and Co. 1907. 15s.

Sanitary Engineering with respect to Water Supply and Sewage Disposal. By L. F. Vernon-Harcourt, M.A., M.Inst.C.E. London: Longmans, Green and Co. 1907. 14s.

Würzburger Abhandlungen aus dem Gesamtgebiet der praktischen Medizin. Herausgegeben von Professor Dr. J. Müller and Professor O. Seifert. I Supplement-Band. Die Diagnose und Therapie der Anämien, von Dr. J. Arneth. Wurzburg: A. Stuber. 1907. M.9.

La Technique Histo-Bactériologique Moderne. Par le Dr. E. Lefas. Paris: J. B. Baillière and Fils. 1905. F.1.50.

Une Nouvelle Méthode de Diagnostic de la Tuberculose Pulmonaire par la Tuberculine de Koch. Par M. M. A. Moelcer, E. Loewenstein, et E. Ostrovsk. Troisième edition. Paris: A. Poinat. 1907. Fr.1.50.

***** In forwarding books the publishers are requested to state the selling price.**

CALENDAR OF THE ASSOCIATION.

Date.	Meetings to be Held.
JANUARY.	
25 FRIDAY ...	LAMBETH DIVISION, *Metropolitan Counties Branch*, Lambeth Infirmary, Brook Street, Kennington Road, S.E., 4 p.m.; Committee, 3.30 p.m.
26 SATURDAY ...	
27 Sunday ...	
28 MONDAY ...	
29 TUESDAY ...	
30 WEDNESDAY	BATH AND BRISTOL BRANCH, Medical Library of University College, Bristol, 8 p.m.; Council, 7.55 p.m. BRIGHTON DIVISION, *South-Eastern Branch*, Dispensary, 113, Queen's Road, Brighton, 4.30 p.m. SOUTH-WESTERN BRANCH, Athenaeum, Plymouth, 3 p.m. ULSTER BRANCH, Belfast.
31 THURSDAY ..	
FEBRUARY.	
1 FRIDAY ...	KENSINGTON DIVISION, *Metropolitan Counties Branch*, Marylebone Infirmary, St. Charles Square, Notting Hill, W., 4.45 p.m. PERTHSHIRE BRANCH, Royal Infirmary, Perth, 3.20 p.m.
2 SATURDAY ...	
3 Sunday ...	
4 MONDAY ...	
5 TUESDAY ...	
6 WEDNESDAY	
7 THURSDAY...	WANDSWORTH DIVISION, *Metropolitan Counties Branch*, Bolingbroke Hospital, 4 p.m.
8 FRIDAY ...	HAMPSTEAD DIVISION, *Metropolitan Counties Branch.*
9 SATURDAY...	
FEBRUARY *(Continued).*	
10 Sunday ...	
11 MONDAY ...	LONDON: Ethical Subcommittee, 2 p.m.
12 TUESDAY ...	LONDON: Organization Committee, 11 a.m.
13 WEDNESDAY	
14 THURSDAY...	
15 FRIDAY ...	BORDER COUNTIES BRANCH, Carlisle.
16 SATURDAY...	
17 Sunday ...	
18 MONDAY ...	LONDON: Premises Committee, 2.30 p.m.
19 TUESDAY ...	CITY DIVISION, *Metropolitan Counties Branch*, Great Eastern Hotel, E.C., 4 p.m.
20 WEDNESDAY	
21 THURSDAY...	
22 FRIDAY ...	
23 SATURDAY ...	
24 Sunday ...	
25 MONDAY ...	
26 TUESDAY ...	
27 WEDNESDAY	BATH AND BRISTOL BRANCH, Bath.
28 THURSDAY...	WANDSWORTH DIVISION, *Metropolitan Counties Branch*, Balham (Hotel), 8.45 p.m.
MARCH.	
1 FRIDAY ...	
2 SATURDAY...	
3 Sunday ...	
4 MONDAY ...	
5 TUESDAY ...	
6 WEDNESDAY	LONDON: South-Eastern Branch Council, 3.15 p.m.

MEMBERSHIP OF THE BRITISH MEDICAL ASSOCIATION.

THE British Medical Association exists for the promotion of medical and the allied sciences, and the maintenance of the honour and the interests of the medical profession.

The Annual Subscription to the British Medical Association is £1 5s. 0d., and the BRITISH MEDICAL JOURNAL is supplied weekly, post free, to every member of the British Medical Association wherever he may reside.

Forms of application for membership can be obtained from the General Secretary, 429, Strand, London, W.C.

The principal rules governing the election of a medical practitioner to be a member of the British Medical Association are as follow:

Article III.—Any Medical Practitioner registered in the United Kingdom under the Medical Acts and any Medical Practitioner residing within the area of any Branch of the Association situate in any part of the British Empire other than the United Kingdom, who is so registered or possesses such medical qualifications as shall, subject to the Regulations, be prescribed by the Rules of the said Branch, shall be eligible as a Member of the Association. The mode and conditions of election to Membership shall from time to time be determined by or in accordance with the By-laws. Every Member, whether one of the existing Members or a subsequently-elected Member, shall remain a Member until he ceases to be a Member in accordance with the provisions hereof.

By-law 1.—Every Candidate for Membership of the Association shall apply for election in writing, addressed to the Association, and stating his agreement, if elected, to abide by the Regulations and By-laws of the Association, and the Rules of such Division and Branch to which he may at any time belong and to pay his subscription for the current year.

By-law 2.—Every candidate who resides within the area of a Branch shall forward his application to the Secretary of such Branch. Notice of the proposed election shall be sent by the Branch Secretary to the General Secretary of the Association, and to every Member of the Branch Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a member of the Association by the Branch Council at any meeting thereof held not less than seven days (or such longer period as the Branch may by its Rules prescribe) after the date of the said Notice. A Branch may by special Resolution require that each candidate for election to the Association shall furnish a certificate from two Members of the Association to whom he is personally known. Officers of the Navy, Army, and Indian Medical Services on the Active List are eligible for election through the Council or a Branch without approving signatures as laid down in By-law 3.

By-law 3.—Every candidate whose place of residence is not included in the area of any Branch shall forward his Application to the General Secretary of the Association, together with a statement, signed by three Members of the Association, that from personal knowledge they consider him a suitable person for election. Notice of the proposed election shall be sent by the General Secretary to every Member of the Council, and the candidate, if not disqualified by any Regulation of the Association, may be elected a Member of the Association by the Council at any meeting thereof held not less than one month after the date of the said notice.

The annual subscription to the BRITISH MEDICAL JOURNAL for non-members is £1 8s. 0d. for the United Kingdom, and £1 12s. 6d. for abroad.

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